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to 13.6 per thousand of the population (as compared with 16.9 in the foregoing week), and was thereby also considerably lower than the rate for the corresponding week of last year, in which it amounted to 15.9 per thousand. Of the German large cities only the following could show more favorable figures than Berlin: Elberfeld, Barmen, Altona, Carlsruhe. Schöneberg (with 12.6), and Charlottenburg (with 11.3). The mortality figures of the following cities were considerably higher than the Berlin rate, namely: Hamburg, Leipsic, Dresden, Stuttgart, Munich, Hanover, Danzig, Breslau, Frankfort-on-the-Main, Cologne, Magdeburg, as well as London, Paris, and Vienna. The decrease in the number of deaths among children was not so noticeable as among the higher-age classes. The infant death rate, however, fell from 4.3 per year and mille to 3.6, being thereby lower than the rate for Munich and Leipsic, but higher than the Hamburg figure. Acute intestinal diseases claimed 28 victims (a decrease as compared with the preceding week). On the other hand, there was an increase in the number of deaths from acute diseases of the respiratory organs, which amounted this week to 75. Influenza claimed 10 victims, and 74 persons died of phthisis pulmonalis. Furthermore, there were registered 27 deaths from cancer, 6 deaths from diphtheria (compared with 16 in the preceding week), 8 deaths from scarlet fever, 6 deaths from measles, and 2 persons died by violence.

The death rate of Berlin for the week ended January 30 was only a little higher than that of the preceding week, amounting, calculated on the year, to 13.8 per thousand of the population, as compared with 15.5 for the corresponding week of last year. Among the large German towns and cities only Leipsic, Hanover, Schöneberg (with 13.5), and Charlottenburg (with 12.5) showed more favorable figures than Berlin. The following cities, on the other hand, had a considerably higher death rate than that of Berlin, namely: Munich, Nuremberg, Brunswick, Frankfort-on-the-Main, Cologne, Breslau, Königsberg, as well as London, Paris, and Vienna. There was again a decrease in the number of deaths among children in the first year of life, so that the increased mortality occurred exclusively among the higher-age classes. The death rate among infants, amounting to 3.2 per year and mille, was considerably lower than that of Munich but somewhat higher than the Hamburg figure. There was a slight increase in the number of cases of acute intestinal disease, which caused 33 deaths. Acute diseases of the respiratory organs claimed 68 victims—a decrease as compared with the figures of the last preceding week—among the latter being 11 deaths from influenza. Furthermore, there were registered 76 deaths from phthisis pulmonalis, 44 deaths from cancer, 12 deaths from measles (twice as many as in the foregoing week), 2 deaths from scarlet fever, and 6 deaths from diphtheria. Finally, 12 persons died by violence.

Malignant ankylostomiasis (worm disease).

[Issued by the imperial health department of Germany.]

This disease is not indigenous, but was brought into Germany by foreign workmen. None but workmen in mines are attacked by it in Germany, and with a few exceptions, only miners who work during the daytime.

The germs of the worm, its eggs and larvæ (chrysalis) possess vitality only at high degrees of temperature, great humidity, and under

exclusion of sunshine. They find therefore in mines the most favorable conditions of life.

In case of a chrysalis, which on account of its smallness is not visible to the naked eye, getting into the stomach, and afterwards into the intestines of a man, the real worm developes itself from it. This soon settles itself in the mucous membrane of the gut, sucking continually, similarly to the action of a leech, the blood of the human being. But this is not the only injury caused by the worm; its bite is also poisonous.

Thus the man attacked by the worm gets gradually weaker, the face becomes pale and assumes an ashy hue, the lips and ears also become white. His eyes grow dim, the inside of the eyelids gets pale or even white. The body is easily fatigued, the sensation of fatigue increasing from day to day, sometimes accompanied by swelling of the feet. Then it is time to remove the worm, if the death of the miner is to be averted.

If the disease is recognized in proper time it may be cured with almost absolute certainty, as the worms can be removed by reliable remedies.

The admission of the worm into the human body takes place only through the mouth.

The worms which are found in the intestines only, and nowhere else in the human body, deposit numerous eggs. These can develop into larvæ only when they pass out with the human excreta. The most favorable places for them are in the warm, humid mines as they exist in Germany.

The excreta of one action of the bowels of a person affected with the worm disease may contain thousands, even millions, of eggs.

If the patient relieves his bowels, sitting on the pan in the water-closet during the action of his bowels, the noxious eggs and the larvæ which would develop from them in a few days are made harmless; but if the person allows his excreta to fall upon the open ground, in some corner, or near a water puddle, everybody who by chance comes into contact with the excreta—for example, with the soles of his feet—runs the risk of catching the disease, having admitted the germs.

Everywhere where the soles of the feet, soiled by the excreta, make a step the germs are spread, and, finally, get on the hands or into the mouth of other workmen.

If all miners would abstain from relieving their bowels upon the open ground the disease would disappear of its own accord, as no more larvæ (chrysalis) would be spread.

1. The miner should accustom himself to relieve his bowels before going into the mine.
2. In case of necessity he should in the mine make use only of the pan on the closet.
3. While in the mine the miner should avoid touching his mouth with his hands.
4. The drinking vessel (coffee bottle) should be protected as far as practicable from dirt.
5. When eating food brought into the mine the food should be grasped with the paper in which it is wrapped and not with the hands.
6. The hands should not be washed in the puddle water.
7. The lamp should not be carried with the teeth.
8. After leaving the mine the hands should be thoroughly washed with soap, and the other parts of the body cleaned.